

Nevada State Board of NURSING NEWS

September 2014



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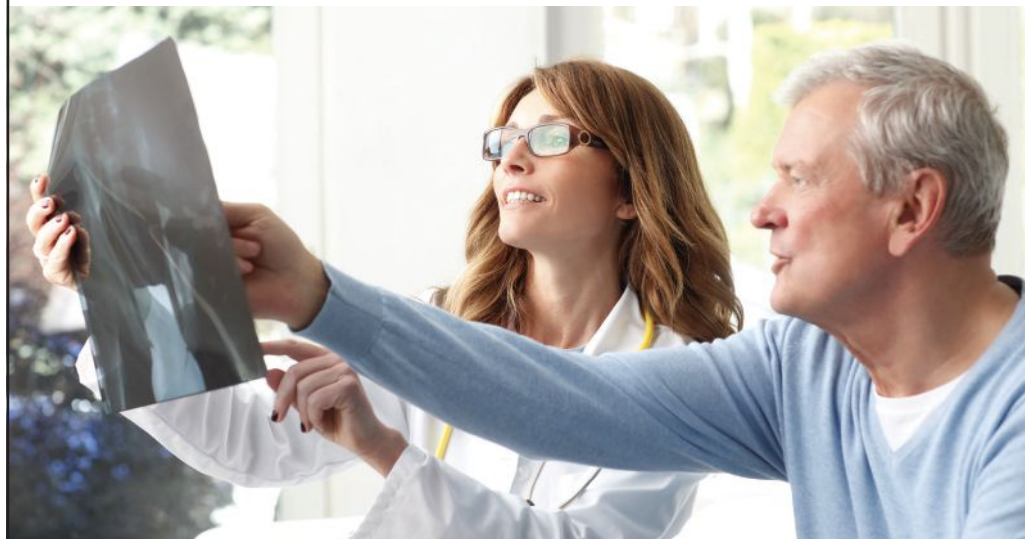
The mission of the Nevada State Board of Nursing is to protect the public's health, safety and welfare through effective regulation of nursing.

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MESSAGE

• FROM THE EXECUTIVE DIRECTOR

Debra Scott, MSN, RN, FRE

During the National Council of State Boards of Nursing's (NCSBN) Annual Meeting in Chicago during the week of August 11, 2014, the Nevada State Board of Nursing received the Regulatory Achievement Award which recognizes the member board that has made an identifiable significant contribution to the purposes of NCSBN in promoting public policy related to the safe and effective practice of nursing in the interest of public welfare.

In this issue's Words from the President, our Board president, Dr. Tish Smyer thanks the staff of the NSBN. We work very diligently to serve the citizens of Nevada in our mission to protect the public. Each member of the staff contributes to our success in nursing regulation in Nevada. I also want to thank each one of them as I did during our acceptance speech during the presentation ceremony.

In hopes of not seeming like a mutual admiration society, I must thank our Board members for their wise direction and insightful leadership as we have worked together throughout the years. We, as staff, are blessed with a Board who takes on each new challenge with visionary, insightful consideration. Each member works in collaboration with the other Board members through respectful discussion, valuing each other's perspective and expertise. The level of excellence in governance is apparent during each board meeting and continues throughout their time together in every setting. It was evident during the NCSBN Annual Meeting and is evident in every interaction that I have witnessed. It is an honor and a joy to serve with each one of them.

I am so lucky to have the support of each one of our Board members. Balancing time and resources can be complex. Finding the best resolution to each of the challenges that we face in nursing regulation is often fraught with politics and opposing agendas. Choosing the best path

to meet our mission is really the basis of my position as executive director. The Board members direct that path.

I would be remiss to not mention other contributors to our being given this award. Governor Sandoval submitted a letter of recommendation as part of our award nomination packet. I'm sure his description of the work that the NSBN has done in several areas in our state was a deciding factor in NCSBN's choosing to give the award to us. Nursing leadership in several organizations have contributed to the opportunities that the NSBN has had in serving the Nevada Nurses Association, the Nevada Organization of Nurse Leaders, the Nevada Action Coalition, the Nevada Alliance for Nursing Excellence, as well as specific nursing associations, including, but not limited to the Nevada Advanced Practice Nursing Association and the Philippine Nurses Association. Our alliances with other regulatory boards—pharmacy, medicine, osteopathy, and dental—including the Bureau of Health Care Quality and Compliance gives us a much broader perspective so that we don't operate in a silo as we work to protect the citizens of Nevada.

So, the conclusion that I know is true—the NSBN did not receive this award alone—we received it in honor of the many others who have a common goal—to support excellence in quality, safe nursing care in Nevada. Thanks to you all from the bottom of my heart.



WORDS

• FROM THE PRESIDENT

Tish Smyer, DNSc, RN, NSBN President

Nevada State Board of Nursing Celebrates Regulatory Award

At the National Council of State Boards of Nursing (NCSBN) Annual Delegate Assembly, in August 2014, the Nevada State Board of Nursing (NSBN) was chosen to receive the Regulatory Achievement Award. The award criteria was:

- Active participation in NCSBN activities
- Effective leadership in the development, implementation and maintenance of licensing and regulatory policies
- Active collaborative relationships among the member board or associate members, NCSBN, and the public
- Demonstrated advancement of the NCSBN Mission

While the NSBN is a highly functioning board, the translation of regulatory policies into practice relies heavily on the skill and knowledge of our NSBN Board Staff. These dedicated individuals work on a day to day basis to implement policies and assist with licensure and discipline.

With the leadership of Executive Director Debra Scott the staff provides a wide range of services from fingerprinting to licensing for over 40,000 individuals including registered nurses, licensed practical nurses, advanced practice registered nurses, certified nursing assistants, and certified registered nurse anesthetists. They work with new graduates and nurses who are endorsing into our state. They ensure data in Nursys, the national licensure verification system, is accurate and keep the website up to date. The Education Consultant Roseann Colosimo participates in programs for the schools and she facilitates the nursing school consortium, which assists schools and agencies to maximize organization and identification of clinical sites. We also are fortunate to have hired a new Associate Director, Cathy Dinauer, who has many years of practice experience. Our Director of Operations, Chris Sansom, has responsibility for program management. There are a lot of staff and not all of them can be identified here but you can find their names and positions inside this magazine.

The NSBN Board members would like to formally thank each and every one of these individuals. We know we are fortunate to have a very talented NSBN staff who strives every day to make sure that the citizens of Nevada health, safety and welfare are maintained.

RURAL COMMUNITY



By Roseann Colosimo, PhD, MSN, RN

On a recent spring day I drove from the Reno airport to Yerington, specifically South Lyon Medical Center, to conduct a site survey of their nursing assistant training program. The agricultural fields surrounding Yerington were just turning green and the mountains had only a slight hint of snow at the very top. Nursing, the wonderful career that can be practiced where ever there are people, is as needed in rural Nevada as in our urban areas.

South Lyon Medical Center in Yerington is one of Nevada's small rural hospitals. With only 175 employees, it has been providing healthcare to their community for more than 60 years. Rural hospitals like SLMC, Pershing General in Lovelock, Mt. Grant Hospital in Hawthorne, Grover C. Dils Medical Center in Caliente and Battle Mountain General Hospital in Battle Mountain are very distant from the urban centers of Reno and Las Vegas. Yerington is 90 miles from Reno and 400 miles from Las Vegas. Although services like surgery and obstetrics are not provided, SLMC still offers 24 hour emergency room, lab and radiology services, a 14 bed

acute inpatient unit and a 49 bed long-term care unit. SLMC also operates three rural health clinics to provide primary care to the community.

The nursing assistant training program site survey went well. Kris Beck, RN is the program coordinator and lead instructor and has filled that assignment for 25 years. Kris is the Director of Employee Services for SLMC but once a year she conducts a CNA course for 8 students. With the recent retirement of Julie, RN from the Long Term Care (LTC) supervisor position, Kris has found a more than welcomed partner to help instruct and mentor the Nursing Assistant Trainees. Julie was LTC supervisor for more than 20 years and she is a champion and role model for resident rights. During her time she instituted, with the help of her staff, a resident centered culture change. Residents' schedules became flexible. Not an early riser? Yes, you can sleep in and get breakfast later. Don't react well in the middle of the night when awakened to change a brief? This nursing staff tried different products to find a high absorbency brief that protected the resident from skin breakdown. Two male patients benefited during the trial and the aggressive, acting out behaviors from being awakened became non-existent. There is a beautiful garden that was named for Julie at her retirement. It literally is in the middle of the facility with access from the hospital side and LTC side. Julie says Kris is the sunshine as her commitment to having well trained and committed nursing assistants is strong. Without its own nursing assistant training program, Kris and Julie do not feel SLMC would find the staff they need for their LTC.

The staffing ratios at this non-profit facility are what most nurses' dream of – 1:15 on the day shift and CNAs have 8-10 residents. Turnover is low compared to the industry norms. The nurses at South Lyon Medical Center are a wonderful blend being very committed to the community and committed to the opportunity of doing nursing care with time for assessments and getting to know the patients. Sami, RN, the Director of Nursing, is a Yerington native and was born at SLMC. She points out that in a small rural facility there are two resources, the doctor's brain and the nurse's brain. Sami is hopeful that the mining industry in the area will expand and that medical services at South Lyon will grow. Sami laughs





and says "Even though we don't do obstetrics, we delivered 3 babies in our ED last month." SLMC employs four Advanced Practice Nurses in its three clinics. They offer primary care to the community and save many people the travel, time and expense to go to Carson City or Reno.

I was able to speak with a few new nurses on duty that day. Marisol, RN is a homegrown registered nurse who was a CNA at SLMC for 10 years, completing the SLMC nursing assistant training program right out of high school. She talks about important people in her life like Dr. G. Brown who every week asked her, "Did you sign up for nursing school yet?" Marisol loves the elderly residents and remarks that they have a resident who is 98 and has been with them for 15 years.

Tamara, RN told me that she was in the banking financial

world but not really happy. The opportunity presented itself to go to Western Nevada College and she grabbed it. School was hard but she loves being a nurse. She considers finding her job at SLMC a real gift compared to some other experiences she had as a new graduate.

Dena, RN, another recent graduate from Western Nevada College, also did a career change. She has lived in Yerington a long time and with two children, likes that she doesn't have to commute. Dena loves the entire life span experience from acute and emergency room to long term care.

Rural nursing is a challenge with its own unique skill set. The support of colleagues and working as a team is very satisfying to these nurses and CNAs. Small rural hospitals are a vital part of their community and fill a crucial need in a state where the distances are great.



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MOTIVATIONAL INTERVIEWING: Helping Patients Change Behavior

By Susan S. VanBeuge, DNP, APRN, FNP-BC, CNE, FAANP



Motivational Interviewing (MI) is a method used to focus on helping individuals facilitate behavior change. The initial description was developed by William R. Miller in 1983, where he was working with problem drinkers. Over the years, this method has been researched, practiced, taught and tested in various settings where behavior change is a goal¹.

Motivational interviewing is linked with other psychological theories to include the formulation of cognitive dissonance (Festinger, 1957)², self-perception theory (Ben, 1967)³, and Rogers Person-centered theory (1959)⁴. The common theme is that individuals' perception of their own attitudes can elicit and propel their own reasons for change⁵.

In our own practices as nurses, we work with patients educating and treating in a holistic manner. Our focus is often on behavior change to promote wellness, improved health and engagement in their own well-being. Motivational interviewing is a skillful style for eliciting the patient's own motivation for making a behavior change in the interest of their own health. It is a style that utilizes guiding rather than directing and listening more than telling. The spirit of this style is collaborative, evocative, and honoring patient autonomy.

The guiding principles for MI include: resisting the right reflect; understanding and exploring the patient's own motivation; listening with empathy; and empowering the patient, encouraging hope and optimism. Resisting the right reflex is sometimes difficult to overcome as a health care provider. We often want to help by correcting or stopping behavior by telling what to do. Naturally, patients often will resist and respond with many reasons why they cannot make change! Exploring motivations for change is important for the provider to elicit why a person would want to make change and how they might do it. Listen for cues in the conversation regarding their concerns, values and motivations while resisting the reflex to insert your own reasons for change! Listen to your patient. As providers, we often inform and educate but we don't always listen. Active listening is important so you may hear the motivation cues, resistance, and openness to change. Last, empower the patient so they can make the change in their own health¹.

How do we fit this into nursing practice? This fits for practice from bedside nursing, outpatient care, advanced practice and

home care. An easy guide to use is the "ask, inform, and listen" framework⁶. The concept of ask requires the provider to get to know the patient with open ended questions such as "what's your biggest concern today about ____? What concerns you most about the medications prescribed? Tell me more about ____." Beware of traps where you ask, ask, ask, and never actually allow the patient to answer or you fail to listen. Open-ended questions allow the patient to tell their story.

Inform simply involves letting the patient know options and explore what makes sense to them. Consider the priorities of your patient, keep it positive and mind the amount of information you are providing. Patients often feel overloaded with the barrage of information we provide, so slow down! Remember that your patient is a person and not a human information receptacle.

Listen. When a provider actually listens, patients feel like you've spent more time with them. This can be hard to learn because we have questions to ask with limited time to spend on each encounter. Remember that you don't have to feel the need to fix or intervene. If you listen for the cues in what a patient is telling you, they will often direct the conversation so you may support their need for change. Patients know they need to do a variety of behavior changes: lose weight, exercise more, stop smoking, cut back on drinking, or get more sleep. When we really listen and connect, the patient will tell you the desire to change and the agenda they would like to pursue.



If you listen, you will hear the most important things for a patient where your knowledge, skill and educational resources can facilitate their ability to incorporate change into their daily lives.

During the patient encounter, it is good to periodically draw reflect and summarize for clarity. This will help you, as the provider, to give back to the patient their own statements to reflect on their own motivation for change. Think of this summary as a basket of flowers where all of the individual blossoms are brought together to make a bouquet where you to give back to the patient as a reflection of their own motivations for change.

Motivational interviewing takes some work, but can easily be incorporated into practice. It has been shown to be effective in a variety of settings in patients with cardiovascular disease, diabetes, diet, exercise, oral health, and alcohol use⁷. Consider learning more about this style and bringing into your practice to support patients in positive behavior change.

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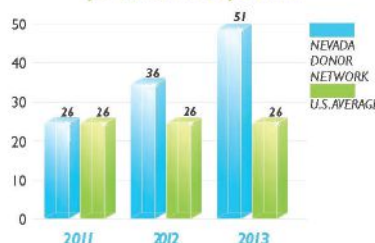
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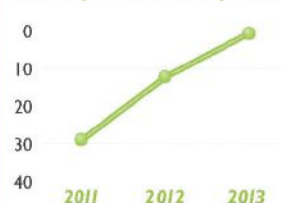
Nevada Donor Network has undergone a substantial transformation by changing our organizational culture and the way we operate on behalf of those we serve. These favorable changes are evidenced by the growth we have experienced in the past two years. From 2011 to 2013, our organ donation activity has increased by 96% and our tissue recovery activity has grown by 65%. We are also seeing steady growth in our ocular recovery. We anticipate these trends will continue on an upward trajectory, saving more lives and healing more people in the years to come.

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NU DONOR

Christopher Ruby



The loss of our son, brother, nephew, cousin and friend, Christopher Ruby, is a wound that will never fully heal. With a damaging physical wound, there is an initial trauma, followed by a recovery and healing phase, which in turn will one day heal in the form of the scar. The emotional scar of losing him is one that will never leave us as complete as we were before, but just as with physical scars, this emotional scar leaves us with a story that we will never forget. Or, in the case of Christopher's aunt, a physical scar of healing from him to match her emotional scar.

Christopher suffered an unfortunate accident while snowboarding. Even after resuscitation attempts by his father, the ski patrol and medical personnel, Christopher's time in this life had come to an end.

Just 20 years old at the time of his passing, Christopher was just beginning to grow into the man his friends and family knew he would become. In high school, he was a member of the Navy JROTC. After graduating, he followed his passion for the automotive field and received an Associate's Degree in Applied Technology. His career started at Exotic Car Works in Las Vegas, where his talents began to truly show. In addition to his exceptional work ethic, Christopher displayed an equal dedication to all things outdoors.

Despite the grief of losing his son, Christopher's father Jeff had a mind clear enough to start thinking about how the loss of his son could better the world. The sight of his own sister on crutches helped Jeff see how that would happen. Just weeks before Christopher's passing, his Aunt Lori had torn her anterior cruciate ligament while skiing. Christopher's parents explained Lori's injury to Nevada Donor Network and arrangements were made to use Christopher's anterior cruciate ligament to repair his aunt's injury. Lori was humbled and grateful to receive such a gift from her nephew.

Although his family will never get to see Christopher fully grow into the man they all knew he was already becoming, they are thrilled he had the opportunity to have a positive impact on the lives of others, even after his passing. As the emotional scar of Christopher's passing continues to heal, those who receive the blessings of his eyes and tissues will have a physical scar as evidence of his loving, caring, and giving spirit. And, with his aunt Lori as a proud example, physical scars sometimes are the best way to aid in healing emotional scars.

-Ruby Family

DAISY 2014 AWARD

First Ionnis A. Lougaris VA Medical Center Nurse Receives DAISY Award for Extraordinary Nurses

The DAISY Foundation and UnitedHealthcare partner to award nurses for delivering quality and compassionate care

Camilla Thomas, LPN, became the first nurse of Ionnis A. Lougaris VA Medical Center to receive the DAISY Award for Extraordinary Nurses, presented by The DAISY Foundation and UnitedHealthcare, at a special ceremony today in Reno, Nevada.

Thomas received a certificate commending her for being an “Extraordinary Nurse” to her veteran patients. The certificate reads: “In deep appreciation of all you do, who you are, and the incredibly meaningful difference you make in the lives of so many people.”



Photo Credit: Lance Iversen

James Combs, director, Central California & Northern Nevada Market, UnitedHealthcare Military & Veterans presents the first DAISY Award to Camilla Thomas, LPN, Ionnis A. Lougaris VA Medical Center.

L to R: Melissa Barnes, vice president, The DAISY Foundation

Rachel Crossley, RN, associate director, Patient Care Services, Ionnis A. Lougaris VA Medical Center

Camilla Thomas, LPN, Ionnis A. Lougaris VA Medical Center DAISY Award winner

Ivy Thomas, granddaughter of Camilla

Lisa Howard, acting director, Ionnis A. Lougaris VA Medical Center

James Combs, director, Central California & Northern Nevada Market, UnitedHealthcare Military & Veterans

The DAISY Foundation’s unique recognition program is part of many hospitals’ recruitment and retention programs, helping to offset the acute shortage of nurses nationwide. Each month, nurses are selected by their nursing administration and peers to receive the DAISY Award, established by family members in memory of J. Patrick Barnes. Barnes died in 1999 at the age of 33 from complications of Idiopathic Thrombocytopenic Purpura.

An excerpt from Thomas’ nomination form read: “Camilla has never refused to do something that would accommodate a veteran. Whether it is an eye acuity test, ear lavage, medication injection, checking a veteran in for another nurse, etc., I have seen Camilla drop her things (while walking out the door to leave work for the day) to give a veteran a flu shot. She truly loves the veterans as much as they love her. Veterans often ask for Camilla by name, and whether the veteran is in her panel or not – she helps them. She is an asset to Primary Care and it shows in her work every day. Camilla truly deserves this award.”

Thomas resides in Reno and has worked at Ionnis A. Lougaris VA Medical Center for nearly 10 years.

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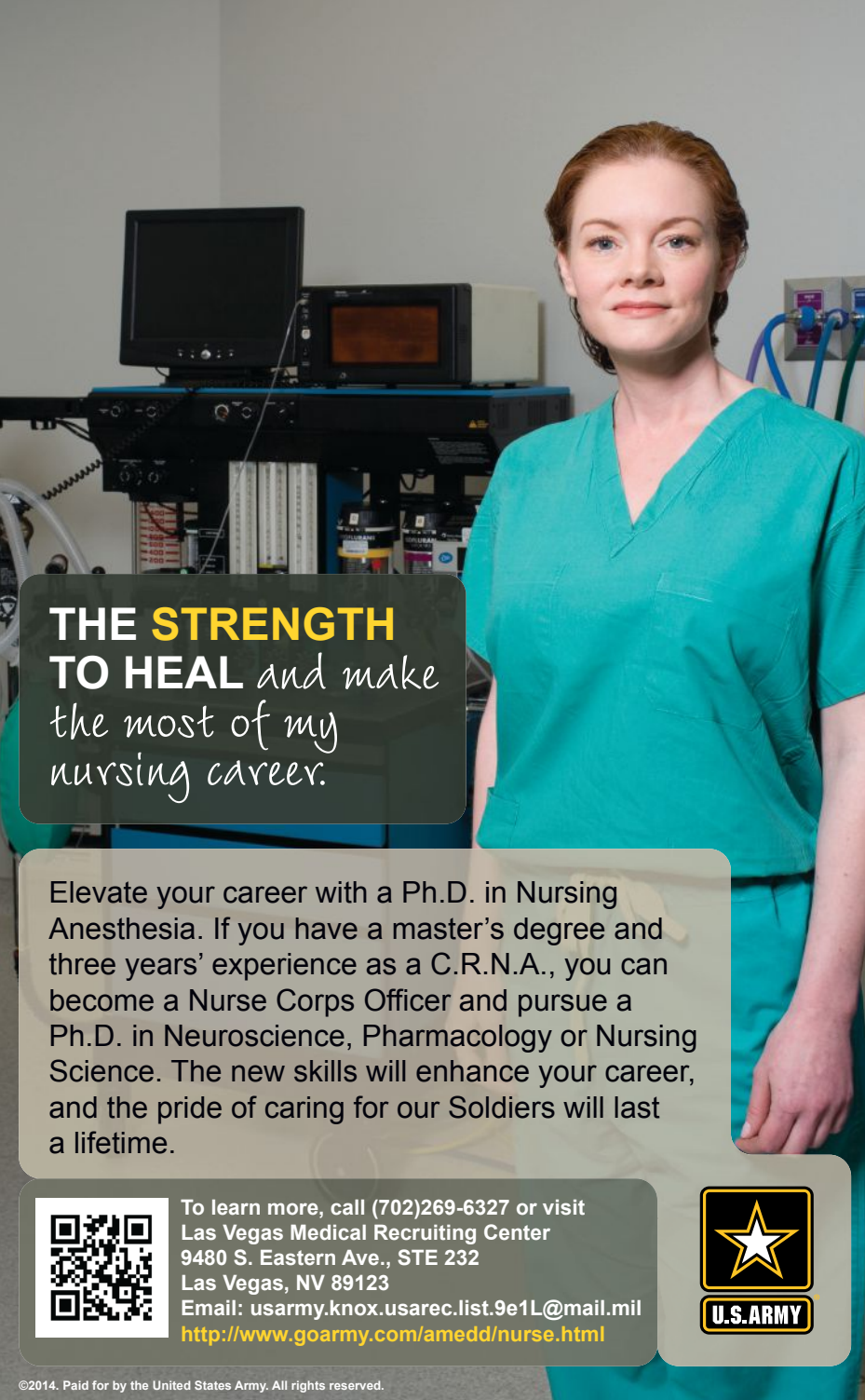
Renewal Requirements

By Jennifer Snidow, MPH, MBA, CNA

In July, the Nevada State Board of Nursing met for its annual business meeting in Lake Tahoe. During this meeting, the board reviews trends and statistics for the nursing profession in Nevada for the previous year, which is measured from July 1, 2013 to June 30, 2014. The statistics I was most pleased to see was the number of initial CNA applications in the state increased by 11.4% over the previous year. Further, renewal applications increased for CNAs by 30% over the previous year. This means that not only are we training and certifying more CNAs in Nevada, but those who are already certified are choosing to continue in the field and maintain their certificate.


This increase in new CNAs got me thinking that it would be a good time to review the renewal requirements and continuing education requirements for CNAs in Nevada. The requirements to renew a CNA certificate include a combination of work hours and inservice hours and are required to ensure that CNAs in Nevada are competent and safe to practice.


The first renewal requirement is that you have practiced, as a CNA for at least forty (40) hours within the CNAscope of practice under the direction of a licensed nurse. Remember, hours working as a Medical Assistant under the direction of a physician or as a Residential Aide in an Assisted Living facility do not count. You must work as a CNA under the direction of a licensed nurse. You will be asked to provide your



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supervising RN's license number at the time of your renewal. Generally, the license number would be that of your unit supervisor, manager or director of nursing. Further, practice must be for paid compensation, volunteer hours do not count for CNA renewal purposes.

Second, you must have completed 24 inservice hours within the renewal period. Sixty (60) minutes of participation in an inservice training equals one contact hour. Further, college credit, if taken as part of an education program to obtain a higher nursing degree, can be used to fulfill your inservice requirement. Make sure that whatever CEU provider you use is approved by the Nevada State Board of Nursing. If you are not sure, call the board office. The staff are always happy to help! Finally, it is also important to remember the renewal period is the 24 months which immediately precede your renewal date. For example, if you are renewing on 12/15/14, your 40 work hours and your 24 hours of inservice must be between 12/15/12 and 12/15/14. Work hours and inservice hours outside of the preceding two years will not be counted towards your renewal. If you have not completed your renewal requirements within the specified time frame you risk having your renewal application denied.

Again, I'm very excited to see the number of new CNAs and existing CNAs in Nevada is continuing to grow. By ensuring that you have properly met your renewal requirements for your CNA certificate means that you are taking an active role in ensuring the health and safety of Nevada's citizens.



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IDEA

What a novel idea nurses doing nursing!

The Wall Street Journal on July 22, 2014 had an article entitled "Better Care at Your Bedside" by Laura Landro. Ms. Landro starts the article by pointing out that in a 12 hour shift nurses may spend less than 2 hours in direct patient care. In 2010, Novant Health did an internal audit which found that less than 2 hours in 12 hour shift which Sallye Liner their Chief Clinical Officer called totally unacceptable. The other 10 hours are spent chasing lab results, finding equipment, tracking down medication. Research has shown that the more time nurses spend at bedside the less likely patients will experience falls, infections and medication errors and they will be more satisfied with care. Novant has set goals for nurses of 6.5 hours by the end of this year and 8.5 hours by the end of 2015. Novant analysis also found the electronic medical record at the bedside reduced by 42 minutes the time spend paging doctors, faxing, copying and tracking down tests.

Patricia Rutherford a nurse and Vice President at the Institute for Healthcare Improvement is quoted in the article as saying "We shouldn't be using expensive professional nursing time doing unnecessary and inefficient things when that time could be reinvested in direct patient

care." Novant expanded duties of licensed practical nurses and certified nursing assistants. A switch was made to a team based model and everyone works to their full scope which saved Novant 20 million dollars last year. Kathleen Venant a clinical unit leader says nurses had to take classes on delegation to help make changes as nurses had to change their behaviors of running around doing everything.



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BLOOD EXPOSURE is not part of the job.

IV Catheter Related Risks: Know the Facts. Share the Solution. #Voicelt2014

Peripheral IV catheter insertion is the most commonly performed invasive procedure in a healthcare setting.

More than 330 Million peripheral IV catheters used every year in the US alone.



KEYS TO QUALITY CARE.



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Frequency of Placement in The United States:



More than 10 per second.

\$100,000

Yearly cost in time and supplies to cleanup blood spills from inserting IV catheters: >\$100,000 for an average 300-bed hospital.

Nurses who use traditional IV catheters report blood leakage during insertion:



49% experience blood leakage 50% of the time

(Survey of 104 IV RNs; Richardson et al., Nursing Management, 2011)



20% experience blood leakage 100% of the time.

33% of nurses admit to not routinely wearing gloves when performing an invasive procedure.



(Survey of >2,000 RNs; Doebbeling et al., Clinical Infectious Diseases, 2003)

% of Needlestick Injuries Unreported:



(Survey of 455 HCWs; Kessler et al., American Journal of Infection Control 2011)

% of Mucocutaneous Exposures Unreported:



Mucocutaneous Exposure is a common occurrence.



46% of nurses experience blood exposure to their skin, eyes, nose or mouth at least once a month while inserting an IV catheter.

(Survey of 379 RNs who place IV catheters; Jagger et al., Nursing 2011)

Did You Know?

The OSHA Bloodborne Pathogen Standard requires employers to maintain an Exposure Control Plan to "eliminate occupational exposure or reduce it to the lowest feasible extent"

The Exposure Control Plan includes:

Hospitals must review exposure data & evaluate safer medical devices every year

Hospitals must solicit input from non-managerial employees responsible for direct patient care

Evaluation of new technology must consider device effectiveness and the potential to minimize occupational exposure

New IV catheters exist that offer complete blood control to prevent occupational exposure

OSHA stipulates that selecting a device "solely on the cost is not appropriate" and warns that "advances in technology might not be captured if an employer is bound by contract to only evaluate devices from a single manufacturer"

(29 CFR 1910.1030 and Letters of Interpretation)

How can clinicians use their voice to adopt safer medical devices and eliminate occupational exposure?

Recognize that healthcare worker safety is the key to quality patient care

Share the facts and figures on occupational exposure

Review your hospital's Exposure Control Plan and endorse adoption of safer medical devices

Share your voice and pass this on to other clinicians

Share the Facts on IV Catheter Risks.

Your Voice Matters!

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BOARD TALK

BOARD MEETINGS

A seven-member board appointed by the governor, the Nevada State Board of Nursing consists of four registered nurses, one practical nurse, one certified nursing assistant and one consumer member. Its meetings are open to the public, agendas are posted on the Board's website and at community sites.

BOARD MEETING DATES

September 17-19, 2014	Las Vegas
November 5-7, 2014	Reno
January 14-16, 2015	Las Vegas
March 25-27, 2015	Reno
May 20-22, 2015	Las Vegas
July 22-24, 2015	Zephyr Cove
September 16-18, 2015	Las Vegas
November 4-6, 2015	Reno

MEETINGS AND OPENINGS

The openings (listed in parentheses) will occur in the next six months. All meetings will be held via videoconference in Reno and Las Vegas.

Advanced Practice Registered Nurse Advisory Committee (none)

November 4, 2014
February 24, 2015
May 5, 2015
August 4, 2015
November 3, 2015

Certified Nursing Assistant Advisory/ Medication Aide-Certified Committee (two)*

October 2, 2014
January 6, 2015
April 2, 2015
July 7, 2015
October 1, 2015

*One MA-C and one Long Term Care RN

• COME TALK TO THE BOARD

During each regularly scheduled meeting of the Nevada State Board of Nursing, Board members hold a Public Comment period for people to talk to them on nursing-related issues.

If you want to speak during the Public Comment period, just check the meeting agenda for the date and time it will be held. Usually, the Board president opens and closes each day of each meeting by inviting Public Comment. Time is divided equally among those who wish to speak.

For more detailed information regarding the Public Comment period, please call the Board.

• WE'LL COME TALK TO YOU

Board staff will come speak to your organization on a range of nursing-related topics, including nursing education, continuing education, delegation, the impaired nurse, licensure and discipline processes, and the Nurse Practice Act.

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ADVISORY COMMITTEES

The Nevada State Board of Nursing is advised by and appoints members to five standing advisory committees. Committee meetings are open to the public; agendas are posted on the Board's website and at community sites. If you are interested in applying for a committee appointment to fill an upcoming opening, please visit the Board's website or call the Board office for an application.

Disability Advisory Committee

October 17, 2014
April 17, 2015
October 16, 2015

Education Advisory Committee (one)

October 16, 2014
January 22, 2015
April 16, 2015
October 15, 2015

Nursing Practice Advisory Committee (none)

October 7, 2014
December 9, 2014
February 10, 2015
April 17, 2015
June 9, 2015
August 25, 2015
October 6, 2015
December 8, 2015

MOVING?

Now you can change your address online!

The law requires you to inform the Board when you change addresses

You're required by law to inform the Board, in writing, of any address change, including a zip code change. The easiest and fastest way for you to make your address change is to go to the Board's website and click on the Address Change link. You may also send an email to nursingboard@nsbn.state.nv.us, call the Board and request an address change form, or mail a signed letter to the Las Vegas office. Remember to include your name, license or certificate type and number, former address, current address, social security number, date of birth, and email address.

Have a question?
Give us a call.

Nevada State Board of
NURSING NEWS

ADMINISTRATION

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nursingboard@nsbn.state.nv.us

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Program Management
CNA Advisory Committee Chair

Fred Olmstead, General Counsel

Legal Counsel

Dean Estes, Director of Finance/Technology

Budget, Accounting and Payroll
Technology Support
Programming
Website

Roseann Colosimo, PhD, MSN, RN, Education

Consultant

Nursing Education Programs
CNA Training Programs
Continuing Education Programs
Education Advisory Committee Chair
Advanced Practice and International Graduate
Document Analysis

Cathy Dinauer, MSN, RN, Associate Director for

Nursing Practice

Case Review, Investigation and Settlement
Oversight for application review/compliance
Nursing Practice Advisory Committee Chair

Patty Shutt, LPN, Site Operations Supervisor

Las Vegas Site Supervision
Advanced Practice Certificate Processing

Gail Trujillo, Executive Assistant

Assistant to the Executive Director
Scheduling
Board Meeting Agenda and Arrangements
Nurse Practice Act Publication

SUPPORT STAFF

Jeannette Calderon, Management Assistant

Assistant to the Education Consultant
Education Advisory Committee Scheduling
APRN Audits
Continuing Education Providers
Continuing Education Audits

Juan Barajas, Management Assistant

Assistant to the Application Coordinator
Discipline Investigative Support
Yes Answer and Fraudulent Application
Processing
Endorsement Forms
Board Meeting Preparation
Nursys Data Entry

Rhoda Cope, Management Assistant

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Online Renewals
Personnel List
Fingerprinting Inquiries

Christie Daliposon, Management Assistant

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Melissa Meneses, Management Assistant

Assistant to Compliance Coordinator
Board Meeting Preparation
Professional Evaluation Group Scheduling
Nursys Data Entry

Hillary Murphy, Management Assistant

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Assistant to the Associate Director for Nursing
Practice
Discipline Investigative Support
Board Meeting Preparation

PROGRAM STAFF

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nursingboard@nsbn.state.nv.us

Investigations and Monitoring

Linda Aure, BSN, RN-BC, Senior Investigator

Complaint Investigations
Nursing Practice Questions

Vacant Position,

Compliance Coordinator

Disability Advisory Committee Chair
Professional Evaluation Group Scheduling
Probation and Alternative Program Monitoring
Reinstatement Applications

C. Ryan Mann, BSN, RN, Application Coordinator

Application Review
Fraudulent Application Screening

Cindy Peterson, RN, CLNC, CHCQM, Investigator

Complaint Investigations
Nursing Practice Questions

Sherri Twedt, RN, CLNC, Investigator

Complaint Investigations
Nursing Practice Questions

Licensure/Certification

Ariadna Ramos, Program Assistant

Endorsement Applications
Licensure Eligibility Questions
Spanish-speaking Services for Consumers
Program Support of Licensure and Certification

Patty Towler, Senior Certification Specialist

CNA Registry Maintenance
CNA Certification and Renewals
Certification Audits (CNA, CRNA)

Sandy Webb, Program Assistant

Licensure Eligibility Questions
Examination Application
International Nurse Graduates and Licensure
Issues
RN/LPN CEU Audits

Support

Jill Caldwell

Taylor Loveland

Lacy Reynolds

Anthony Sipes

-Receptionists

Renewal Applications
Program Support
Inquiries, Information and Referrals
Licensure and Certification Applications

BOARD MEMBERS



Patricia "Tish" Smyer, DNSc, RN

President,
Term expires 10/31/2016



Mary-Ann Brown, MSN, RN

RN Member
Term expires 10/31/16



Sandra Halley

Consumer Member
Term expires 10/31/2017



Rick Carrauthers, LPN

Vice President
Term expires 10/31/17



Rhigel Tan, DNP, APRN, RN

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Term expires 10/31/15



Jennifer Snidow, MPH, MBA, CNA

CNA member
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THE RACE TO CELEBRATE NURSING



By Tracey Long RN, Ph.D., MS, MSN, CDE, CNE, CHUC, CCRN

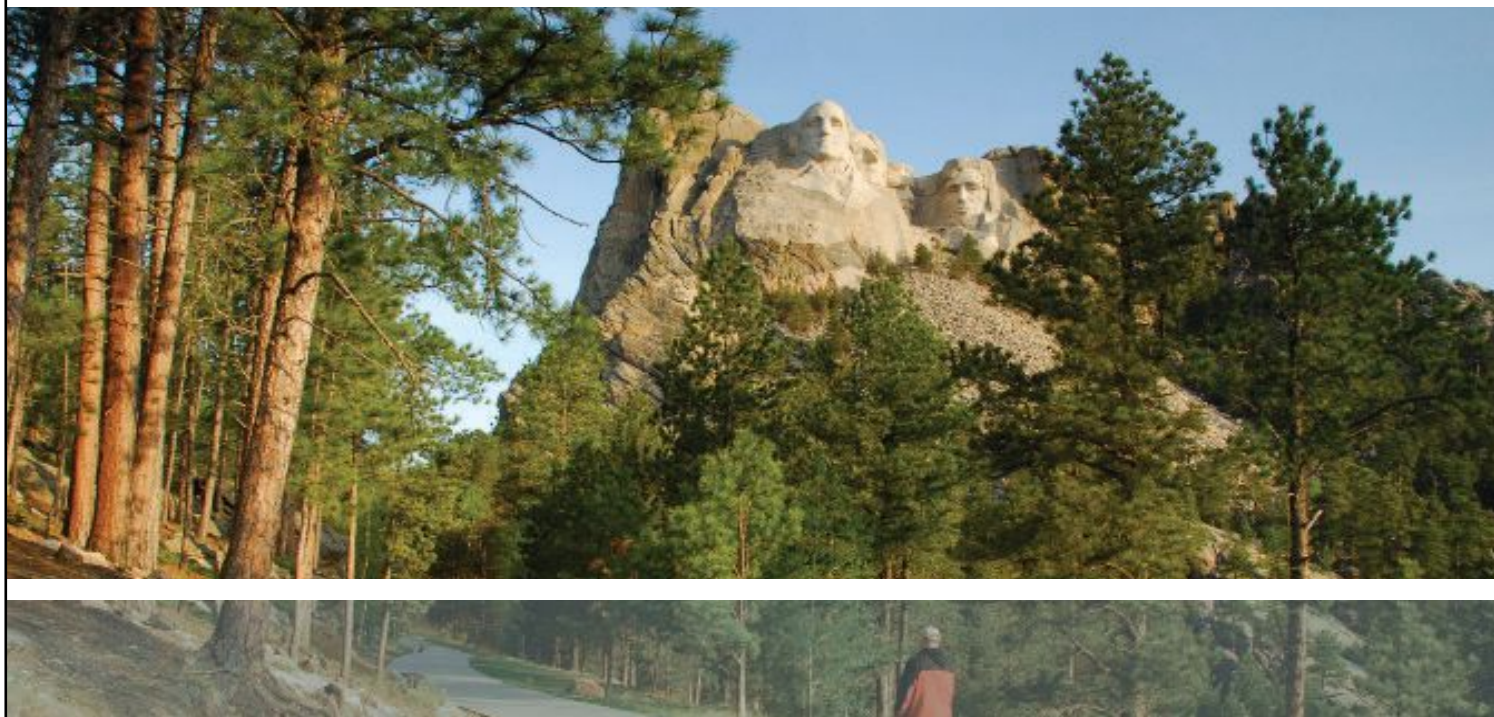
Running to keep up with the crowd is easy to do when you're a nurse leading the way towards health and wellness. To celebrate National Nurses Week this past May and promote fitness, a group of nurses and nursing students created the newest 5K "Miles4Medicine" and hosted its first annual fun run. All participants received scrub shirts to run in and supported the celebration of nurse week. Profits went to help the group serve a medical mission to Peru this summer for an international service learning experience. 20 nurses and students will be volunteering in underserved communities where medical services are limited or unavailable. Under the direction of local physicians and working with the country's Department of Health, the group will volunteer as public health nurses in

remote communities offering free home visits and medical clinics for two weeks. Nurse Educator Tracey Long led a group of 18 nursing students last summer to Belize and states, "These nursing students learn so much more than what we can teach them in books about community health and the impact nurses can make on families and their wellness." Miles4Medicine received a contribution from the State Board of Nursing, which will be used to purchase medical clinics expanding the influence of our Nevada State Board internationally. To learn more about the 5K run, go to www.miles4medicine.com. To learn more about volunteering as a nurse for international medical service and earn continuing education credit, go to www.islonline.org or email: longforhome@gmail.com.





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